## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

## Secretary of State DIVISION OF CORPÓRATIONS

## **FILED** May 19 1997 8:00am Secretary of State

DOCUMENT # P93000074615 (4) 1. Corporation Name  GOLDEN PLANET HOLDINGS, INC.  Principal Place of Business 701 BRICKELL AVE. 8UITE 2800  SUITE 2800								
MIAMI FL 33131		MIAMI FL 33131-2834	:		3. Date Incorporated or Qualified	3a. Date		eport
6 District				·	10/27/1993	02/23		
2. Principal P.	ace of Business	2a. Mailing Address			4, FEI Number 65-0451757			plied For of Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4/5	П	\$8.75	
22		27			5. Certificate of Status Desired		Fee Re	
City & State	<del>)</del>	City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t	
Zip 24	Country 25	Z(p	30 Cou	nlry	8. This corporation has liability for i	ntangible ta		199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Ag	ent	
PERI	.OW, JEFFREY M		81 Name	ne				
1820 EAST HALLANDALE BEACH BLVD.				82 Street Add	ess (P.O. Box Number is Not Acceptable)			
HALI	ANDALE FL 33009			83		· · · · · · · · · · · · · · · · · · ·		
							- T	
				84 City				Dode
office or reagent. I a	io the provisions of Sections 607.050 agistered agent, or both, in the State in familiar with, and accept the oblig	02 and 607.1508, Florida Statu o of Florida. Such change was lations of, Section 607.0505, F	tes, the al authorized lorida Stat	pove-named corp d by the corporal ules.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of ch al the appoir	nanging it ntment as	s registered registered
	Signature, typed or printed name of registered ag			Agent signature requi		DATE		
12.	OFFICERS AN	D DIRECTORS  DELETE	13.	ı.F	ADDITIONS/CHANGES TO OFFIC		TRECTOR  Change	S IN 12
NAME	LEVIN, MICHAEL		1.2 NA	i l		-	3 onunge	
STREET ADDRESS	444 BRICKELL AVE. #51314		1.3 ST	REF1 ADDRESS				
CITY-ST-ZIP	MIAMI FL 33131			TY-S1-ZIP				
TITLE		DELETE	2111	J		L.	Change	Addition
NAME .STREET ADDRESS			2.2 NA	ME REE1 ADORESS				
CITY-ST-ZIP			•	TY-ST-ZIP				
TITLE		☐ D£LETE	3.1 Ti				Change	Addition
NAME			3.2 NA	ME (				
STREET ADDRESS			3.3 S1	REFT ADDRESS				
CITY-ST-ZIP				TY - S1 - ZIP				
TITLE		DELETE	4.1 70			L_	_ Change	Addition
NAME STREET ADDRESS			4.2 N	AME REET ADORCSS				
CITY-ST-ZIP				IY-SI-ZIP				
TITLE		☐ DELETE	5.1 10				Change	Addition
NAME			5 2 N/	IME				
STREET ADDRESS			5.3 ST	REE1 ADDRESS				
CITY-ST-ZIP				TY+S1-ZIP			,	
TITLE		☐ DELETE	6.1 Til	L			] Change	Addition
NAME			62 N/	1				
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP	by certify that the information supplie			IY-\$T-ZIP				

I am an officer or director of the corporation or the receiver or trustee appears in Block 12 or Block 13 if changed or an attachment will execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: